Express Mail No.: EL988724505US

Date Deposited: 10/14/2003

PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

8404.001

CLAIMS AS FILED - PART I

FOR	NUMBER FILED (Column 1)	NUMBER EXTRA (Column 2)	SMALL ENTITY RATE	SMALL ENTITY FEE	OR	OTHER THAN SMALL ENTITY RATE	OTHER THAN SMALL ENTITY FEE
BASIC FEE (37 CFR 1.16(a))				$ 0	OR		$ 0
TOTAL CLAIMS (37 CFR 1.16(c))	24 minus 20 =	* 4	x $ 9 =	0	OR	x $ 18 =	72
INDEPENDENT CLAIMS (37 CFR 1.16(b))	4 minus 3 =	* 1	x 43 =	0	OR	x 86 =	86
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))		0	+ 140 =	0	OR	+ 280 =	0
* If the difference in column 1 is less then zero, enter "0" in column 2			TOTAL	0	OR	TOTAL	158

CLAIMS AS AMENDED - PART II

AMENDMENT A

	CLAIMS REMAINING AFTER AMENDMENT (Column 1)		HIGHEST NUMBER PREVIOUSLY PAID FOR (Column 2)	PRESENT EXTRA (Column 3)	SMALL ENTITY RATE	SMALL ENTITY ADDITIONAL FEE	OR	OTHER THAN SMALL ENTITY RATE	OTHER THAN SMALL ENTITY ADDITIONAL FEE
Total (37 CFR 1.16(c))	*	Minus	** 20	= 0	x $ 9 =	0	OR	x $ 18 =	0
Independent (37 CFR 1.16(b))	*	Minus	*** 3	= 0	x 43 =	0	OR	x 86 =	0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ 140 =	0	OR	+ 280 =	0
					TOTAL ADDIT. FEE	0	OR	TOTAL ADDIT. FEE	0

AMENDMENT B

	CLAIMS REMAINING AFTER AMENDMENT (Column 1)		HIGHEST NUMBER PREVIOUSLY PAID FOR (Column 2)	PRESENT EXTRA (Column 3)	RATE	ADDITIONAL FEE	OR	RATE	ADDITIONAL FEE
Total (37 CFR 1.16(c))	*	Minus	**	=	x $ 9 =	0	OR	x $ 18 =	0
Independent (37 CFR 1.16(b))	*	Minus	***	=	x 43 =	0	OR	x 86 =	0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ 140 =	0	OR	+ 280 =	0
					TOTAL ADDIT. FEE	0	OR	TOTAL ADDIT. FEE	0

AMENDMENT C

	CLAIMS REMAINING AFTER AMENDMENT (Column 1)		HIGHEST NUMBER PREVIOUSLY PAID FOR (Column 2)	PRESENT EXTRA (Column 3)	RATE	ADDITIONAL FEE	OR	RATE	ADDITIONAL FEE
Total (37 CFR 1.16(c))	*	Minus	**	=	x $ 9 =	0	OR	x $ 18 =	0
Independent (37 CFR 1.16(b))	*	Minus	***	=	x 43 =	0	OR	x 86 =	0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ 140 =	0	OR	+ 280 =	0
					TOTAL ADDIT. FEE	0	OR	TOTAL ADDIT. FEE	0

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SEND TO: Mail Stop Patent Application
Commissioner For Patents, PO Box 1450
Alexandria, VA 22313-1450

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2003

Application or Docket Number: 10685019

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)	SMALL ENTITY TYPE ☐		OR	OTHER THAN SMALL ENTITY	
			RATE	FEE		RATE	FEE
TOTAL CLAIMS	24		BASIC FEE	385.00	OR	BASIC FEE	770.00
FOR	NUMBER FILED	NUMBER EXTRA					
TOTAL CHARGEABLE CLAIMS	24 minus 20=	* 0	X$ 9=		OR	X$18=	72
INDEPENDENT CLAIMS	4 minus 3 =	* 1	X43=		OR	X86=	86
MULTIPLE DEPENDENT CLAIM PRESENT		☐	+145=		OR	+290=	
			TOTAL		OR	TOTAL	928

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

		(Column 1)		(Column 2)	(Column 3)	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
AMENDMENT A	Total	*	Minus	**	=	X$ 9=		OR	X$18=	
	Independent	*	Minus	***	=	X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐					+145=		OR	+290=	
						TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

		(Column 1)		(Column 2)	(Column 3)			OR		
		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
AMENDMENT B	Total	*	Minus	**	=	X$ 9=		OR	X$18=	
	Independent	*	Minus	***	=	X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐					+145=		OR	+290=	
						TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

		(Column 1)		(Column 2)	(Column 3)			OR		
		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
AMENDMENT C	Total	*	Minus	**	=	X$ 9=		OR	X$18=	
	Independent	*	Minus	***	=	X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐					+145=		OR	+290=	
						TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.